



HEALTH QUARTERLY STATEMENT

As of June 30, 2001
of the Condition and Affairs of the

Maine Partners Health Plan, Inc.

NAIC Group Code..... 0671,	0671	NAIC Company Code..... 95728	Employer's ID Number..... 01-0511382
(Current Period) (Prior Period)			
Organized under the Laws of Maine		State of Domicile or Port of Entry Maine	
Country of Domicile United States of America			
Licensed as business type Health Maintenance Organization			
Date Incorporated or Organized..... May 31, 1996		Date Commenced Business..... January 1, 1998	
Statutory Home Office	2 Gannett Drive..... South Portland ME 04106-6911 (Street and Number) (City or Town, State and Zip Code)		
Main Administrative Office	2 Gannett Drive..... South Portland ME 04106-6911 (Street and Number) (City or Town, State and Zip Code)		207-822-7000 (Area Code) (Telephone Number)
Mail Address	2 Gannett Drive..... South Portland ME 04106-6911 (Street and Number or P. O. Box) (City or Town, State and Zip Code)		
Primary Location of Books and Records	2 Gannett Drive..... South Portland ME 04106-6911 (Street and Number) (City or Town, State and Zip Code)		207-822-7000 (Area Code) (Telephone Number)
Internet Website Address	www.mainepartners.com		
Statement Contact	Shawn Kevin Staples (Name) shawn.staples@anthem.com (E-Mail Address)		207-822-7942 (Area Code) (Telephone Number) (Extension) 207-822-8999 (Fax Number)

OFFICERS

Chairman of the Board Roger Thomas Pezzuti, M.D.
President James William Donovan
Treasurer Vincent Salvatore Conti
Secretary James Thomas Parker

VICE PRESIDENTS

DIRECTORS OR TRUSTEES

Roger Thomas Pezzuti , M.D.	Mary Callam Brandes , M.D.	George Steven Isaacson	Donald Edward Quigley
Vincent Salvatore Conti	William Lewis Caron , Jr.	Guy William Marszalek #	David Lee Reinke
James Thomas Parker	Erin Patricia Hoefflinger	Donna O'Leary Moore #	Martin Jack Robles , Esq.
Larry Gardner Anderson , M.D.	Betsy Anne Holmes	Harry Eastman Page , Jr.	Robert Allan Sturges , M.D.

State of..... Maine
County of..... Cumberland

The officers of this reporting entity being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to, is a full and true statement of all the assets and liabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions therefrom for the period ended, and have been completed in accordance with the NAIC Annual Statement Instructions and Accounting Practices and Procedures manual except to the extent that: (1) state law may differ; or, (2) that state rules or regulations require differences in reporting not related to accounting practices and procedures, according to the best of their information, knowledge and belief, respectively.

(Signature)	(Signature)	(Signature)
James William Donovan	James Thomas Parker	Vincent Salvatore Conti
(Printed Name)	(Printed Name)	(Printed Name)
President	Secretary	Treasurer

Subscribed and sworn to before me this
.....day of, 2001
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